UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

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FORM D

NOTICE OF SALE OF SECURIT PURSUANT TO REGULATION D, SECTION 4 (6), AND/OR

SEC USE ONLY Prefix Serial DATE RECEIVED

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Nashville Infrastructure LLC, \$239,400 aggregate amount of Limited Liability Company interests	3					
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section	4(6) ULOE					
Type of Filing: New Filing Amendment	RECD S.E.C.					
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer	MAY 25 71103					
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Nashville Infrastructure LLC	1088					
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)					
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203	(615) 312-0123					
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)					
(if different from Executive Offices)						
Brief Description of Business Owning and/or leasing certain property and providing management	ent and other infrastructure and related					
goods and services to Imaging Alliance-Nashville PET LLC.						
Type of Business Organization	/					
☐ corporation ☐ limited partnership, already formed ☐	other (please specify):					
□ business trust □ limited partnership, to be formed	Limited Liability Company					
Actual or Estimated Date of Incorporation or Organization: Month Year						
CN for Canada: FN for other foreign jurisdiction) 11 N						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Imaging Alliance LLC (Manager)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Sanders III, Willis S. (Chief Executive Officer)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203								
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Cooper, R. Seth								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o The Consultant Group PC, 4230 Harding Road, Suite 707E, Nashville, Tennessee 37205								
Check Box(es) that Apply: Promoter 🗵 Beneficial Owner 🗆 Executive Officer 🗆 Director 🗀 General and/or Managing Partner								
Full Name (Last name first, if individual)								
Pruitt, Ron								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o Nashville Gastrointestinal Specialists Inc., 4230 Harding Road, Suite 309W, Nashville, Tennessee 37205								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Tishler, Steven D. (President)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203								
Managing Partner								
Full Name (Last name first, if individual)								
Priest II, Edward M. (Vice President)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Robinette Jr., Charles L. (Treasurer)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
210 25th Avenue North, Suite 602, Nashville, Tennessee 37203								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes No
Answer also in Appendix, Column 2. if filing under ULOE.	
2. What is the minimum investment that will be accepted from any individual?	\$ Yes No
3. Does the offering permit joint ownership of a single unit?	X I
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.	
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a	
state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	☐ All States I ☐ID
IL IN IA KS KY LA ME MD MA MI MN M	_
MT DE DN DN DN DN DN DN DO	_
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Tuli Name (Dast hame first, it murvidual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
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(Check "All States" or check individual States)	I 🔲 ID
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RI SC SD TN TX UT VA WA WV WI W	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
N. CA CALLED IN D. I	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	. All States
□ AL □ AK □ AZ □ AR □ CA □ CO □ CT □ DE □ DC □ FL □ GA □ H □ IL □ IN □ IA □ KS □ KY □ LA □ ME □ MD □ MA □ MI □ MS □ M	
MT NE NV NH NJ NM NY NC ND OH OK C	R PA
RI SC SD TN TX UT VI VA WA WV WI W	Y PR
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	0	Aggregate ffering Price		Amount Already Sold
	Debt	\$	0.00	s	0.00
	Equity	-	0.00	-	0.00
	□ Common □ Preferred			٣.	
	Convertible Securities (including warrants)	\$	0.00	s	0.00
	Partnership Interests	\$ \$		•	
	Other (Limited Liability Company Interests	\$ \$	············	-	239,400.00
	Total	\$ \$		-	
		"	237,400.00	Ф.	237,400.00
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		16	\$_	239,400.00
	Non-accredited Investors		0	\$	0.00
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			•	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505			\$	
	Regulation A			\$_	
	Rule 504			\$	
	Total				
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	\$	0.00
	Printing and Engraving Costs		🗆	\$	0.00
	Legal Fees		🗆	\$	0.00
	Accounting Fees		🗆	\$	0.00
	Engineering Fees		🗆	\$	0.00
	Sales Commissions (specify finders' fees separately)		\square	\$	0.00
	Other Expenses (identify)		🗆	\$	0.00
	Total			\$	0.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES ANI	D USE	OF PROCEE	os	
	b. Enter the difference between the aggregate offering 1 and total expenses furnished in response to Part Cagross proceeds to the issuer."	ng price given in response to Part C - Que Question 4.a. This difference is the "ad	estion justed	\$_		239,400.00
5.	Indicate below the amount of the adjusted gross proce for each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of gross proceeds to the issuer set forth in response to I	purpose is not known, furnish an estimat f the payments listed must equal the ad	te and			
				Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees		□ \$ _	0.00	□ \$_	0.00
	Purchase of real estate	,	□ \$_	0.00	□ \$ _	0.00
	Purchase, rental or leasing and installation of ma	achinery and equipment	□ s _	0.00	□ \$ _	0.00
	Construction or leasing of plant buildings and fa	cilities	□ \$ _	0.00	□ s _	0.00
	Acquisition of other businesses (including the va					
	offering that may be used in exchange for the as issuer pursuant to a merger)	ssets or securities of another	□ s _	0.00	□ s _	0.00
	Repayment of indebtedness		□ s _	0.00	□ \$ _	0.00
	Working capital		□ s _	0.00	□ s _	239,400.00
	Other (specify):		_ 🗆 \$_	0.00	□ \$ _	0.00
			_			
			□ \$_	0.00	□ s _	0.00
	Column Totals				□ \$_	239,400.00
	Total Payments Listed (column totals added) .			□ \$	239,	400.00
		D. FEDERAL SIGNATURE				
sig	ne issuer has duly caused this notice to be signed by the gnature constitutes an undertaking by the issuer to furn a information furnished by the issuer to any non-accret	ish to the U.S. Securities and Exchange	Comm	ission, upon wri	Rule 50 tten red	15, the following quest of its staff,
ls	suer (Print or Type)	Signature	,	Date		-20-03
N	ashville Infrastructure LLC	Signature Stand	u	1	<u> </u>	- 20 03
N	ame of Signer (Print or Type)	Title of Signer (Print or Type)				
V	Villis S. Sanders III	Chief Executive Officer				
						_
Γ		ATTENTION				
l	Intentional misstatements or omissions	of fact constitute federal criminal viola	tions.	(See 18 U.S.C.	1001.)	